Attorney Docket No.: 450			
First Named Inventor: Nian-hua Ou, et al.			
COMPLETE IF KNOWN			
Application Number			
Application Number: Filing Date:			
Group Art Unit:			
Examiner Name:			
UTILITY PATENT APPLICATION DECLARATION AND POWER OF ATTORNEY			
Declaration Submitted with Initial Filing Declaration Submitted After Initial Filing			
As a below named inventor, I hereby declare that:			
My residence, post office and citizenship are as stated below next to my name.			
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter claimed and for which a patent is sought on the invention entitled: Laminated Wood Piece and Door Containing the Same			
the specification of which			
is attached hereto			
was filed onas United States Application Number or PCT International Application No and was amended on (if applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.			
I acknowledge the duty to disclose information that is known to me to be material to patentability in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).			
I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:			
Prior Foreign Application(s): Number Country Day/Month/Year Filed Yes No			
Day/inionul/ Teal Filed 165 NO			
Additional foreign application numbers are listed on a supplemental priority sheet I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:			
Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application			
numbers are listed on a supple- mental priority data sheet attached hereto			

[Page 1 of 2]





Attorney Docket No.: Attorney Docket No.: 01-450

First Named Inventor: Nian-hua Ou, et al.

DECLARATION -- Utility or Design Patent Application

I hereby claim the benefit under Title 35, United States Code, Section 119 of United States provisiona
application(s), and/or Section 120 of any United States application(s) listed below and, insofar as the subjec
matter of each of the claims of this application is not disclosed in the prior United States application in the
manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty
to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) tha
occurred between the filing date of the prior application and the national or PCT international filing date of this
application.

U.S. Parent Application or PCT	Parent Filing Date	Parent Patent Number
Parent Number(s):	(MM/DD/YYYY)	(if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connection therewith:

I hereby appoint the following attorney(s) and/or agent(s) to prosecute and transact all business in the Patent and Trademark Office connected herewith:

Carlos Nieves, Reg. No. 25,042;

David Mitchell Goodrich Reg. No. 42,592

Direct all correspondence to:

Name:

David Mitchell Goodrich, Esq.

J. M. Huber Corporation

Address:

333 Thornall Street

City:

Edison

ZIP: 08837-2220

Country:

US

Telephone: (732) 603-3674

State: NJ

Fax (732) 603-8730

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Nian hua Ou		
Inventor's signature:	Date:	
Residence: Watkinsville. GA, USA	Citizenship: US	
Post Office Address: 1791 Julian Drive		
City, State, Zip and Country: Watkinsville, GA 30529		
Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) attached hereto.		

[Page 2 of 2]



Attorney Docket No.: Attorney Docket No.: 01-450

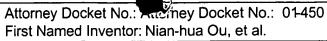
First Named Inventor: Nian-hua Ou, et al.

DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet Page 1 of 1

Full name of second inventor: Dave Willis	
Inventor's signature:	Date:
Residence:	Citizenship:
Post Office Address:	
City, State, Zip and Country:	
Full name of third inventor:	
Inventor's signature:	Date:
Residence:	Citizenship:
Post Office Address:	
City, State, Zip and Country:	
Full name of fourth inventor:	
Inventor's signature:	Date:
Residence:	Citizenship:
Post Office Address:	
City, State, Zip and Country:	
Full name of fifth inventor:	
Inventor's signature:	Date:
Residence:	Citizenship:
Post Office Address:	
City, State, Zip and Country:	



DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet Page 1 of 1

Full name of second inventor: David Russell Willis	.,
Inventor's signature: Jami Kusall Wellin	Date: 3/14/02
Residence: Davidson, NC, USA	Citizenship: US
Post Office Address: 18608 River Crossing Blvd.	
City, State, Zip and Country: Davidson, NC 28036 USA	
Full name of third inventor:	•
Inventor's signature:	Date:
Residence:	Citizenship:
Post Office Address:	
City, State, Zip and Country:	
	·
Full name of fourth inventor:	
Inventor's signature:	Date:
Residence:	Citizenship:
Post Office Address:	
City, State, Zip and Country:	
Full name of fifth inventor:	
Inventor's signature:	Date:
Residence:	Citizenship:
Post Office Address:	

City, State, Zip and Country: